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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/595,571
Filing Date	04/27/2008
First Named Inventor	You
Title	GENE EXPRESSION AND POLYMORPHISMS THAT ARE PREDICTIVE OF LUNA CAN
Art Unit	
Examiner Name	
Attorney Docket Number	2272704393

I hereby appoint:

☐ Practitioners associated with the Customer Number:

24024

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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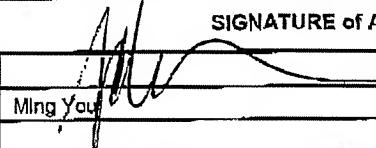
<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	11-1-04
Name	Ming You	Telephone	314-362-7879
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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INDICATION FORM**

Application Number	10/585,571
Filing Date	04/27/2008
First Named Inventor	You
Title	OPTIC EXPANSION AND POLYMERIZATION THAT ARE PRECURSORS OF LUMESCA
Art Unit	
Examiner Name	
Attorney Docket Number	2272704883

I hereby appoint:

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<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Fax		

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	10/23/06
Name	Zhongguo Zhang	Telephone	
Title and Company	Inventor		

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INDICATION FORM**

Application Number	10/586,671
Filing Date	04/27/2006
First Named Inventor	You
Title	GENE EXPRESSION AND POLYMORPHISMS THAT ARE PRESENT IN A CELL
Art Unit	
Examiner Name	
Attorney Docket Number	2272704383

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☐ Practitioner(s) named below:

Name	Registration Number

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<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Fax		

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of Record

Signature	<i>Manabu Fukumura</i>	Date	Apr 23 06
Name	Manabu Fukumura	Telephone	81-3-3542-2511
Title and Company	Inventor		

NOTE: Signatures of all the inventors or Assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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